ONTARIO

DEPARTMENT OF THE SECRETARY AND REGISTRAR

Sp 1087

REPORT

of

COLIN G. SNIDER, COMMISSIONER,

IN INQUIRY RESPECTING

ONTARIO HOSPITAL, HAMILTON.

PRESENTED TO THE LEGISLATIVE ASSEMBLY
BY COMMAND

H. C. Nixon.

PROVINCIAL SECRETARY.

COMMISSION OF INQUIRY

-Re-

ONTARIO HOSPITAL

-at-

HAMILTON.

COMMISSIONER's REPORT.

REPORT of COLIN G. SNIDER, Judge of the County Court of the County of Wentworth, appointed a Commissioner to enquire into, investigate and report upon the administration, management, conduct, discipline and welfare of the ONTARIO HOSPITAL, Hamilton.

To His Honour the Lieutenant Governor in Council.

Your Commissioner appointed by Royal Commission under the Seal of the Province of Ontario bearing date the twenty-second day of January in the year of Our Lord one thousand nine hundred and twenty to investigate and report upon the matters hereinbefore mentioned with such recommendations as your Commissioner may think desirable, having taken upon himself the burthen of the investigation reports as follows:-

On the 11th day of February A. D. 1920 the investigation was commenced at the Ontario Hospital, Hamilton, and it was finished on the 17th day of February A. D. 1920. Public notice was given in the Hamilton Spectator, the Hamilton Herald and the Hamilton Times, daily newspapers published in the City of Hamilton, calling attention to the issue of the Commission, its purpose and scope and to the time and place of holding the investigation and calling on all persons having knowledge of c charges and matters to be investigated, or which ought to be investigated, to give information thereof to your Commissioner or to S. F. Washington K. C. appointed as Counsel to aid in the presentation and prosecution of all such charges and matters.

Each charge, complaint and matter coming

within the scope of your Commissioner's authority and which was brought in any way to his notice was fully investigated.

It is a matter of great satisfaction to your Commissioner to be able to report that no charge or complaint was made by any person against the Superintendent, or Assistant Superintendent, or against any of the physicians of the Ontario Hospital at Hamilton. Every inmate and witness who spoke of these officers said that they were always attentive to the inmates and treated them with kindness and consideration.

The same statement applies to the chief executive officers.

From the evidence and from personal investigation and observation which your Commissioner took the opportunity to make, he is satisfied that the administration and management of this Hospital is good and worthy of the confidence of those who have or may have occasion to have relatives or friends there.

No charge of misconduct or improper conduct, other than violence towards patients, was made against any person engaged in any capacity in, or in connection with, this Ontario Hospital.

There were many charges made and investigated alleging violent treatment of patients by certain named attendants and nurses, such as striking with the fist, slapping, kicking patients and dragging females along the floor by the hair.

Your Commissioner is quite satisfied from the evidence of undoubtedly reliable male and female chief supervising officers and officials and other confirming

facts that such acts of violence towards patients have not been and are not at all of general or frequent occurrence. There undoubtedly have been some occurrences of violence to patients and it could not reasonably be expected that among 50 to 60attendants, selected from the general run of young men who seek such employment there would not be here and there one engaged who would in temper strike a patient who attacked him violently, striking or biting or trying to choke the attendant in the struggle to control the patient.

The evidence shows that many insane patients are very violent, treacherous, sly in attacking other patients and the attendants. I t isthe duty of the attendants to prevent or check these attacks among the patients, who must be together a great part of the day time, and to at once seize and remove and isolate the patient who has become violent. No serious injury was caused a patient by an attendant in any case. One attendant said he had seen twenty to thirty fights start between patients in a day in Ward 8. (Refractory)

The discipline of the employees appears satisfactory upon the whole and it was shewn by the evidence of complainants and witnesses that whenever a complaint has been made to the Superintendent or to the doctor in charge of a ward or other chief officer the matter of the complaint has been properly investigated and remedied. For minor offences a fine is inflicted and for serious offences such as acts of unnecessary violence the offender is dismissed. Where this practice is properly and vigorously followed and enforced as it has been so far as the evidence shews, no better means of enforcing proper

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discipline was suggested.

I t must be remembered that a very considerable number of the most experienced and reliable attendants joined the Canadian Army and went O verseas, and it was impossible during the continuance of the war, when so many of the best young Canadian men were Overseas, to secure from among those remaining at home substitute attendants who were all quite satisfactory. Several attendants who were taken on during this time had to be dismissed for drinking and for rough treatment of patients.

At different times during the war there were not enough attendants obtainable to properly man the wards, and the nurses were and still are over twenty short of the number required.

To enforce discipline among the attendants and nurses and to ensure the welfare of the patients there are three chief attendants between whom are divided all the male wards, a certain number being assigned to each. The three chief attendants are James Slater, there 35 years,- Michael Dean, there 20 years, and Julius A. Halbhans, there 16 years. On the female wards, Margaret O'Donnell, superintendent of all nurses in the Hospital, returned to this Hospital after three years work of nursing wounded soldiers in the Military Hospitals in England and France, has been discharging her duties in this Ontario Hospital since 1910, excepting the three years spent with our Army Overseas,- Nurse Isabella McMillan is head nurse over those in the main building,- Nurse Jane Aikins is acting chief attendant in O rchard House, and Mrs. H. E. Robertson, a widow, is supervisor of nurses in Orchard house, the Infirmary and the Shack, where she has been engaged for the past 16 years.

Relying on his experience in judging character and fitness from appearances, manner and examination, your Commissioner reports that he is of opinion that these Chief officers, both male and female, most of whom appeared before him, are well suited for their duties and are truly interested in the proper discharge of their duties and the welfare of the patients.

It was proved that all these Chief officers devote their whole attention to their work in and about the houses and wards under their respective care. Under these Chief officers there are, as far as they can be obtained, two or three attendants in each male ward and two or three nurses in each female ward, all on duty in their respective wards throughout the whole day.

Each house has its own physician in charge of the wards in it, who makes one morning visit and inspection of each ward under his care and of each inmate of it at a regular hour and at irregular hours through the day makes unexpected visits as his other duties to his sick inmates, etc., will permit.

This staff has charge of some 1250 insane persons, a number of them insane criminals sent here from the penitentiary at Kingston and from other prisons and towns. A much larger number are refractory, treacherous, dangerous patients, who take advantage of an opportunity to pinch, kick, or knock down a fellow-patient or an attendant, and thus start trouble in the ward.

Scenes of which the following is a sample are frequent and shew the difficulties attendants are faced with and in the opinion of your Commissioner, when

viewed by patients looking on and in some cases taking part, are the foundation of many exaggerated charges that have been made. On one occasion at dinner in the dining-room, where the violent men, patients of Ward 8, the refractory Ward, were dining,a patient, whose name I need not mention, suddenly and without apparent cause struck the patient beside him in thenface with his fist a severe blow. This patient told me he was led to strike this man and others on many occasions by the stronger will of some person somewhere entering into him and suggesting to him that he should strike and in fact compelling him to do so for no reason that he knew of. The man who received the blow immediately started to fight his attacker. All became more or less excited and disturbed. Two of the attendants present had to take this man out at once to prevent a general fight among these excited and dangerous inmates, who armed with the dishes and glasses on the table could have done grave injury to each other. The other attendant tried to quiet those in the room. The man being removed fought, kicked, struck and did everything he could to resist being removed to his own room. The charge arising out of this incident is specially dealt with later in this report.

In further reference to the welfare of the patients inthis Hospital your Commissioner reports that one male and one female witness complained of the soup and of general shortage of food, medecines and medical supplies during the war. The man making these charges was an ex-attendant. As regards the soup, it was proved by the Chef, the attendants and patients now there, that the soup and other food has been and is good and this charge not true, that the attendants and other employees eat the same food and soup out of the same pot,etc., as the patients

are given,but it is true that in 1915 or 1916 an expert dietician, named Granger, was sent here by the Department and he ordered the food allowed to be cut down considerably, which was done until by order of the Department it was increased again. His evident exaggeration of events and his manner of giving his testimony gave the impression that this man's statements, which were contradicted by reliable witnesses, were to a certain extent animated by malice and an exaggerated idea of his ability to judge what medecines and dressings the various patients ought to have been given by the doctor in charge. The woman ex-patient, who condemned the food, did not attend. She was subpoenaed but said she would not come.

Many specific charges of violent and cruel treatment of inmates were made by discharged patients against attendants in the wards for male patients and against nurses inthe wards for females. Each complainant claimed to have seen or heard the occurrences they respectively describe.

In the worst charges investigated the alleged acts of cruelty as they were described could only have been committed by men and women of the most brutal instincts and could not possibly have all been concealed from the chief officers. The extravagance which characterized the complainants evidence of itself made their charges practically unbelievable. Any very satisfactory corroboration was lacking. Admittedly no report or complaint was made to a physician or the superintendent or any chief officer. The evidence of other witnesses contradict these stories. The doctors and chief officers swore that none of them ever heard of these brutal acts and some of them in each charge said under oath that such treatment of a patient could not possibly

have been given without it coming to their knowledge either from seeing it or from noticeable marks on the patient or in the rooms or by information given.

These facts and the history, demeanour and appearance of the various witnesses when giving evidence, in the opinion of your Commissioner prove beyond reasonable doubt that these charges of extreme violence and cruelty made against attendants and nurses are not true, but are the discharged patient's amplified memory of false impressions made on his disordered brain on seeing a demented, refractory and violently resisting fellow-patient fighting and struggling against being removed to his room from amongst the other patients or being compelled by force to undress or dress, to go to bed or get out of bed, to take food or take a bath, or do other necessary things against his strenuous resistance as at times had to be done.

Complaints were received from patients saying that they were put in the Asylum, though perfectly sane. Your Commissioner did not investigate any of these, being of opinion that such cases do not come within the scope of the investigation. Your Commissioner would suggest that, having in mind the fact that persons are committed to this Hospital for the insane on the certificate of physicians who have not much, if any, experience in mental cases and mistakes may occasionally be made, arrangements should be made whereby an inmate who claims with any shew of reason that he is sane would be given promptly as a matter of right an examination by an expert in such cases and a report made on his case to the Department.

A further suggestion is that returned soldiers suffering from nervous disturbance due to their experience and suffering in the war should not be sent to a Hospital for the Insane, as long as there is a chance of this trouble passing without the patient becoming actually insane. Some place quite apart from an asylum should be provided. Their future life, even if they are perfectly restored, will be more or less clouded by the fact of having been in an asylum.

Many complaints have been made against the p practice of requiring the male patients to dry themselves after coming out of a bath on used sheets which have been slept on for a week or more. This practice has prevailed for many years in this Hospital and was continued until the beginning of the year 1920. It should not be allowed to be introduced again.

Another complaint is made which your Commissioner recommends should be remedied. It is the practice of having insane criminals in the same ward with non-criminals. As far as possible your Commissioner is of opinion that this should be discontinued.

The specific complaints which came for investigation were as follows:-

1. <u>The case of Percy Bowerman</u>.

There was a complaint by the patient himself that though not insane he was put in this Hospital at the instance of his father. As the patient's father was present some evidence was admitted. It shewed clearly that the patient was properly committed and was manifestly insane. He has been in different asylums in Canada and in the United States where he was allowed to go on probation. He did not suffer harsh treatment here. There

was also a complaint by the father that he was dangerous and should not have been allowed out. It was shewn that he was allowed out on his mother's application and Inspector Dunlop's order on an undertaking that he would not remain in Hamilton.

2. The case of Mary Ann Hoyle at present an inmate of this Hospital.

Her sister Sarah H. Allott attended and claimed that this patient who is her sister is not insane. In her evidence she said she does not complain nor does her sister the patient complain of any bad treatment of any kind. The case was therefore dropped.

3. Frederick O. Park:

This patient, a young man, was committed to this Hospital on the 17th August 1917. He was suffering from Cerebro-spinal syphilis in an advanced stage. He was thirty-two years old. His father is a physician. He was a returned soldier, returned in 1917. When in this Hospital he could not talk rationally and in fact could hardly talk at all and it appeared doubtful if he recognized his relatives on all occasions. He was removed to a private asylum in Guelph and from there in September 1918 he was transferred to the Military Hospital in New Market where he died shortly after.

This patient at one time while in this Ontario Hospital at Hamilton had a cut on his head. Later his right eye was black as from a blow, later his left eye was in the same condition and later he had a black and blue mark on his right side just below his arm said to have been about eight inches square.

Park's father and brother seeing these bruises and the break in the skin on his head thought he was being abused by the attendants. The cut on his head and the mark on one of his eyes were satisfactorily accounted for by accidental falls. The patient's father understood him to say that "Alec did it", in answer to a question as to how he got a black eye. Alec Stewart was one of the attendants. Stewart is now working at a factory in Hamilton and attended and in his evidence said he never struck Park. Dr. Barnes from the Guelph private asylum and Dr. Jaffray from the Hamilton General Hospital, who had made an examination of this patient's blood, both said he was violently resistant and had to be fed, put to bed and taken out of bed, by force; that pressure of the hand would bruise and mark his flesh as would also a slight knock against anything in his condition and a break in the skin was easily caused and would not heal. Dr. Webster, to whom the patient's father spoke of these bruises, investigated the matter with Dr. English and they concluded that there was no reason to suppose they were due to ill-treatment and they were satisfied he was being treated carefully and properly.

Your Commissioner is of opinion that this patient was not ill-treated by the attendant.

4. Islay Chalmers Smith.

This man was a patient in the Hospital for ten months and is now out. He us under the impression he came to the asylum of his own accord as he was suffering from nervous breakdown and there was no better place to go. His complaint is that he was "treated too much like an insane person". He said the food was good, that

he did not get enough outdoor exercise, that he wasnot exactly ill-treated though an attendant once either struck him or pushed him to go upstairs, but did not hurt him at all. The facts are that he was regularly committed to the asylum on the certificate of two physicians and the Police Magistrate and the Inspector's warrant, he did not come voluntarily but was brought by the police. He was in the habit of hiding behind doors, etc.

Smith swore that he saw Alec Stewart, an attendant, strike a patient named Denton, knocking him down and kicking him, that he also saw Stewart knock a patient namedPiper down and kick him when he was down, and that he saw a patient named Lunt with a black eye which he understood was caused by a blow given him by Stewart. These patients were all he said violently dangerous, fighting patients.

Stewart was subpoenaed and gave evidence on these charges. He said he had no trouble with Smith and that he never had any trouble with Denton, He admitted that he had struck Lunt, and he said he did it in self-defence as Lunt attacked him in the bathroom and he had to fight to save himself. He said Piper was a much larger man that he is and attacked him and he was forced to fight him to save himself. Stewart is not now employed at the Asylum.

It is also true that an attendant,named William Glover, who is still an attendant in the refractory ward struck Lunt, knocking him down and kicked him when down.

It was on an occasion when Glover was removing Lunt from the dining-room where he had hit another patient and started a fight. Glover's excuse is that Lunt tried to turn back and get into the dining-room again and he (Glover) "lost his head". He says it is the only time he ever struck a patient.

Your Commissioner finds that it is true as charged that these two attendants, Alexander Stewart and William Glover, did strike and kick patients as charged. It is also the fact that none of these acts of violence were reported to the officers in charge.

5. MRS. DOWRIE'S case.

This complaint is that she was declared insane by collusion between her husband and two doctors. As she has no complaint to make as to her treatment in the Asylum no investigation was had in her case. She is now out.

6. GEORGE WILLIAM HAZELL case.

There was no formal complaint in this case but the facts were of such a nature that it was considered well to hear evidence. This man died suddenly in an epileptic fit and was buried before notice of his death was given to his wife. The body was disinterred, the coffin opened, and he was seen and identified by his widow. The Inspector had the body re-buried according to the wishes of the widow. All the expenses of the funeral were paid by the Department and the widow and friends expressed satisfaction. Evidence was taken at considerable length and accounted in a satisfactory manner for the unfortunate occurrence.

7. MARGARET H. McFARLANE case.

An anonymous letter was received in this case

complaining only of food and of the work she was required to do. These complaints proved to have no foundation in her case.

8. CHARLOTTE HOLLIDAY case.

This ex-patient complains that she was put in the asylum by conspiracy of leading doctors and officials in Orangeville, though she was not insane. There is no doubt but that she was insane and from the nature of her many charges of cruelty to other patients by nurses above suspicion of anything but kindness to patients her sanity may still be doubted. She said the nurses always threw female patients on their backs and dragged them along the floor by their hair when they wanted to move these patients around. The evidence clearly established that her charges were false, though she very possibly believes them herself.

Your Commissioner has not the least difficulty in arriving at the conclusion that her testimony cannot be seriously considered in any case she mentioned. The evidence of many persons puts this beyond doubt.

9. ELIZABETH SINCLAIR case.

There was no complaint here for investigation.

10. JAMES SCOTT Case.

There is nothing to report in this case.

11. JOHN ANDERSON Case.

This is a returned man who was in this asylum on different occasions. He escaped once. He speaks of his own treatment as good upon the whole, excepting that he did not

get enough out-door exercise. He was in during the war, and he says an attendant named W. Beaumont in the summer or autumn of 1917 knocked him down in a contest about possession of a new pack of cards. He says Higgins, another returned soldier, interfered and stopped Beaumont. Anderson says he was not badly hurt by the blow and he did not speak of it to any one.

Your Commissioner is of opinion Anderson's story is correct as to this matter. He says Beaumont asked him not to complain and he did not. Beaumont was dismissed.

He gave evidence as to brutal treatment of a man named Jack Forbes, which one Wardell, an attendant since dismissed, told him had taken place. The statement made by Wardell was proved untrue and the case was satisfactorily explained. All the attendants on this ward are gone and not available as witnesses, excepting Percy B. Lamb who was then supervisor of ward 8 and says the story told by Wardell to Anderson was entirely false.

The most serious matter attested to by Anderson was the brutal treatment, according to witness, of a "red-headed foreigner" whose name he cannot give. This man is said to have goneback to Russia. This is described in great detail by Anderson and is of such an outrageous nature that it could not have taken place without coming to the knowledge of all the officials, superintendent and all, and yet no such case as he describes came to their knowledge. It is contradicted by Chief Slater and he, Dr. Webster and Dr. English swear it could not have taken place as described without coming to their knowledge. One witness was under the impression the foreigner had died since, but that is a mistake. It is one of the most extreme charges of brutal treatment which came to the knowledge of the

G. W. V. A. It lacks corroboration and the impossibility of its occurrence without discovery is proved. It is a case of mental derangement in which many patients in the asylum imagine they hear and see things that have no existence in fact.

12. JOHN HENRY ANDERSON Case.

There is nothing in this case to report.

13. WILLIAM RICHARDSON Case.

This is not a case coming within the scope of this investigation. Mrs. Richardson complains that she and her family have suffered great hardship by reason of the improper sale by the Department of her husband's farm.

14. THOMAS SIDNEY KINGDON Case.

This returned soldier went Overseas in 1916 and returned in March 1918. He was regularly committed to the asylum but he had been confined in the common Gaol for twenty-six days before being taken to the asylum. He was in the asylum from 12th February 1919 until 29th April 1919. He was then let out on probation and has been out ever since. He said "personally I had no complaint as to my treatment while here, but I have seen some pretty bad beatings up". He mentions the case of Solomon Clayman, who Kingdon says was terribly pounded and "beaten up" by James McDonald and one Norton, two attendants, the latter not there now. He gives an incredible account of these two attendants pounding this patient Clayman for a long time, over fifteen minutes, because he would not eat. He said he heard Clayman died three or four days after and he added "I am convinced that the beatings he got

caused his death". Although Kingdon says he saw all this done he did not interfere or report it to any one. Kingdon also gave evidence of Jack Stewart, a patient, having a black eye, which he suspected an attendant named Norton gave him. Kingdon did not see it done, nor does he say any one told him Norton did it. Norton is not there now, nor available as a witness.

Norman Hamburg, a patient at the same time, was called to corroborate the Clayman charge. His evidence is of such a nature that it is unbelievable. Hamburg also neither interfered nor reported to any person. A great amount of evidence was given on these two cases.

The evidence of Dr. English, Chief supervisor of attendants Slater, James McDonald the attendant, Etta Tully a nurse, John Carroll a supervisor whenClayman was there, Mrs. Elizabeth Stewart and Mrs. Sophia Morris, clears up these two cases and prove facts which account for Kingdon's impression of what happened in each case. Clayman made determined efforts to commit suicide by pounding his head on the floor and walls to knock his brains out. These efforts were defeated by various devices used in such cases. He died a natural death from his disease and not from blows or violence.

15. LORA MAY ROGERS Case.

Nothing was proved in this case requiring comment. The complainant was served with a subpoena to attend this investigation and was paid her railway fare to Hamilton and return and her witness fees. She said she would not attend and she did not. She followed the man who served the subpoena and paid her the money to the Railway station and

tried to induce him to take the subpoena and the money from her but he refused to do so. The case was satisfactorily explained by the evidence given.

16. WILLIAM A. WILSON Case.

This is a returned soldier. He had a bruise on his shin which he told his wife was caused by an attendant kicking him. Mrs. Wilson spoke to Dr. Webster about this. He is described as a dangerous irritable patient and at times has to be restrained by force. Dr. English and Dr. Webster investigated this complaint and came to the conclusion that the attendant had not kicked him but that he had got the bruise by accidentally striking something when being restrained when in one of his violent fits. His wife says she does not like leaving him in Ward 8, the refractory ward. She says he is not very insane now but that he cannot be given his liberty or he will wander away aimlessly. She says she thinks he will become quite insane if kept where he is and he thinks the same. She, like many others, thinks a returned soldier should be in a place specially suited to his condition and not in an insane asylum.

17. JOHN HEWSON Case.

This man is an ex-attendant and made one charge of abuse of a patient which the evidence proved satisfactorily was not true. His statements were in your Commissioner's opinion to a certain extent animated by a desire to "get back at " an attendant.

H e complained that the the rations were cut down at one time and he also complained of requiring

the male patients to dry themselves after their bath on sheets taken off the beds after having been used a week or more. Both of these complaints have been remarked upon in the early part of this report.

18. Mrs. EDITH L. PARKER Case.

This woman was a patient in this Asylum. She was regularly admitted on the 23rd of May 1914 and finally discharged on 9th October 1918. She had been confined in an Asylum for the insane in England. She made many charges in a letter to the G. W. V. A. and in an affidavit of ill-treatment of herself and patients, and of insufficient use of disinfectants in cases of typhoid fever patients and in a case of erysipelas . She was subpoenaed and paid her railway fare and witness fees but she refused to come. Every effort was made to secure her attendance. She threatened to have her solicitor get an injunction to stop the investigation of the charges she had made. It was proved by convincing evidence that many of her statements were false and others grossly exaggerated.

The representatives of the G. W. V. A. after hearing and seeing some of the witnesses called said they were convinced that no reliance could be placed on her statements and suggested that it was unnecessary to continue the investigation of them.

Your Commissioner, however, at request of Counsel and of the Superintendent heard evidence offered as to Mrs. Parker's history and as to all her complaints.

ARCHIVES OF ONTARIO

Your Commissioner at the request of the Great War Veterans forwards in connection with this report the very excellent report and suggestions which they make as the result of their observations and of their opinions formed from the evidence, statements, explanations and discussions which took place at the investigation.

Your Commissioner in the early part of this report dealt with some only of these matters recommended by the Great War Veterans Association before he had the opportunity of reading their report.

Your Commissioner now desires to add that he approves of the first, second, third, seventh, sixteenth and the first part of the eighteenth recommendations which they make. Of the others some are now in practice while of others your Commissioner does not feel in a position to speak.

Your Commissioner desires to express his appreciation of the skilful, fair and persistent work of Mr. S. F. Washington K. C. in conducting the examinations. To his efforts and the valuable assistance given him by Messrs Fred W. Tresham and Dugald McLean representing the Central Branch G. W. V. A., Mr. Frank Bryant representing the East End Branch G. W. V. A., Messrs John Fish and Hugh Arnold representing the Mount Hamilton Branch G. W. V. A. and by Mr. J. L. Counsell engaged by the G. W. V. A. to assist Mr. Washington, is due the securing and fair and full presentation of all available evidence on the various charges, complaints and matters which were investigated.

All of which together with a copy of the evidence taken your Commissioner has the honour to respectfully submit.

Dated this 1st Day of March A. D. 1920.

Colin G. Snider
Commissioner.